APPLICATION FOR APPOINTMENT TO BOARDS AND COMMISSIONS APPOINTED BY THE

RUTHERFORD COUNTY BOARD OF COUNTY COMMISSIONERS

REQUEST FOR AF	PPOINTMENT TO:			
NAME:		SOCIAL SE	SOCIAL SECURITY #	
ADDRESS:				
CITY, STATE, ZIP:				
TELEPHONE:HOME:		BUSINESS:		
SEX:	RACE:	AGE:	DATE OF BIRTH	
HOW LONG HAVE	YOU BEEN A RESIDE	ENT OF RUTHERFOR	RD COUNTY:	
PRECINCT IN WHI	CH YOU RESIDE:			
EMPLOYER:ADDRESS:		SS:		
PROFESSIONAL A	ACTIVITIES:			
VOLUNTEER ACT	IVITIES:			
QUALIFICATIONS FOR SERVING ON REQUESTED APPOINTMENT:				
LIST ANY OTHER BOARD OR COMMISSION IN WHICH YOU HAVE AN INTEREST:				
LIST ANY OTHER	BOARDS OR COMMIS	SSIONS ON WHICH Y	OU CURRENTLY SERVE:	
PLEASE ATTACH	A RESUME OR ADDIT	TIONAL INFORMATION	ON THAT IS PERTINENT.	
DATE:	SIGNATURE	:		